Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Page 1 of 56 UNITED STATES BANKRUP Document NORTHERN DISTRICT OF ILLINOIS Fill in this information to identify your case: DEC 23 2015 United States Bankruptcy Court for the: Northern District of Illinois JEFFREY P. ALLSTEADT, CLERK PS REP. DDS Case number (# known): _ Chapter you are filing under: ☑ Chapter 7 Chapter 11 Chapter 12 ☐ Check if this is an Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question, Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Chiquita government-issued picture First name First name identification (for example, your driver's license or passport). Middle name Middle name Hampton Bring your picture identification to your meeting Last name Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you

First name

Middle name

Last name

First name

Middle name

Last name

9 xx - xx -______

(ITIN)

have used in the last 8

Include your married or

3. Only the last 4 digits of

your Social Security number or federal Individual Taxpayer

Identification number

maiden names.

years

First name

Middle name

Last name

First name

Middle name

xxx - xx - <u>1</u> <u>3</u> <u>9</u> <u>3</u>

9 xx - xx -_____

Last name

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Page 2 of 56 Document

Debtor 1 Chiquita	Hampton Lest Name Lest Name	Case number (if known)
THAT THE PARTY OF	LEST Name	***************************************
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any business names or EINs.	l have not used any business names or EINs.
the last 8 years Include trade names and	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN — - — — — — — —	EIN
5. Where you live	And instructions the state of t	If Debtor 2 lives at a different address:
	912 N Central Park	N
		Number Street
	Chicago IL 60651 City State ZIP Code	
	Cook County State ZIP Code	City State ZIP Code County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one:
Dankruptcy	I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

Chiquita

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Page 3 of 56 Document

Debtor 1 Chiquita First Name Mi	idle Name	Hamp Last Name	<u>ton</u>		Case number	(л клошп)
Part 2: Tell the Court	About You	r Bankruptc	y Case			
The chapter of the				of each ooo Me	ofice Demoissant to	
Bankruptcy Code you are choosing to file		, , ,	ກ 2010)). Also, ເ	go to the top of	page 1 and check	11 U.S.C. § 342(b) for Individuals Filing the appropriate box.
under		hapter 7				
		hapter 11				
		hapter 12				
Microphy 2.3-1, thich this house in Annielle Freighe Strawn Strawn (street of the Strawn of the Stra	CI	hapter 13	e November Commission program (see Section 1988) de Commission (see Section 1988) de Commission (see Section 1			
How you will pay the fo	loc yo su wir In Ap I re By les pay	purself, you may builting your that pre-printer to pay to plication for a law, a judge s than 150% by the fee in in	pay pay with car payment on y ed address. he fee in instantional formation of the official pastallments). If	allments. If you have distributed in the second sec	may pay. Typica check, or mone; our attorney may but choose this of Fee in Installmont request this op waive your fee, lat applies to your six option, your prise option, your prise option, your prise option.	heck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is a pay with a credit card or check option, sign and attach the ents (Official Form 103A). In the pay with a credit card or check option, sign and attach the ents (Official Form 103A). In the pay with a credit card or check option only if you are filling for Chapter 7 and may do so only if your income is ur family size and you are unable to must fill out the Application to Have the with your petition.
Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes	. District		When	MM / DD / YYYY	Case number
		District		When		
				Vinen	MM / DD / YYYY	Case number
		District	144A 144A 144A	When	MM / DD / YYYY	Case number
Are any bankruptcy cases pending or being	☑ No					
filed by a spouse who is not filing this case with	☐ Yes.	Debtor			····	Relationship to you
ou, or by a business partner, or by an iffiliate?		District		When	MM/DD/YYYY	Case number, if known
		Debtor				Relationship to you
		District		When		Case number, if known
o you rent your esidence?	No. Yes.	Go to line 12. Has your land residence?		n eviction judgn	nent against you a	and do you want to stay in your
		[7] No 0-4				
		No. Go to				Against You (Form 101A) and file it with

Debtor 1

<u>Chiquita</u>

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 4 of 56

Debtor 1	Uniquita irst Name Middle N	lame	Hampton	Case number (# known)
			and Hame	
Part 3: Re	port About Any	Busine	sses You Own as a	Sala Brandata
			- Total Givin as a	Sole Proprietor
2. Are you a	sole proprietor l- or part-time	Z N	D. Go to Part 4.	
business	?	☐ Y€	es. Name and location o	fhusiness
A sole prop	rietorship is a			
individual, a	ou operate as an and is not a		Name of business, if an	y
separate leg a corporatio	gal entity such as in, partnership, or			
LLC.			Number Street	
sole proprie	more than one torship, use a			
separate she to this petition	eet and attach it			
•			City	State ZIP Code
			Chook the annual of	
				e box to describe your business:
			Single Asset Basi	ness (as defined in 11 U.S.C. § 101(27A))
			Stockbroker (as de	Estate (as defined in 11 U.S.C. § 101(51B))
				efined in 11 U.S.C. § 101(53A)) r (as defined in 11 U.S.C. § 101(6))
			None of the above	
NY INDESCRIPTION OF A PLANT OF THE A STANDARD OF	7	** 1 ** ** ** ** ** ** ** ** ** ** ** **	William Company of the Company of th	
are you a small business debtor? For a definition of small		🗹 No.	I am not filing under Ch	
business deb. 11 U.S.C. § 1	for, see 01(51D).	☐ No.	I am filing under Chapt the Bankruptcy Code.	er 11, but I am NOT a small business debtor according to the definition in
		☐ Yes.	I am filing under Chapte Bankruptcy Code.	er 11 and i am a small business debtor according to the definition in the
rt 4: Reno				
керо	rt if You Own o	r Have	Any Hazardous Pro	perty or Any Property That Needs Immediate Attention
property tha	t poses or is	Ø No		
alleged to po of imminent	ose a threat	☐ Yes.	What is the hazard?	
dentifiable l	hazard to			
oublic nealti Or do you o	า or safety? พท anv			
property that mmediate a	t needs		If immediate attention i	a pandad why is w
nuneulate a			manediate attention i	s needed, why is it needed?
	o you own			
or example, d erishable good hat must be fed	d, or a building			
or example, d erishable good hat must be fed	d, or a building		Where is the property?	
or example, d perishable good hat must be fe	d, or a building		Where is the property?	Number Street
or example, d perishable good hat must be fe	d, or a building		Where is the property?	Number Street
or example, d perishable goo	d, or a building		Where is the property?	Number Street

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 5 of 56

Debtor 1

Chiquita

<u>Hampton</u>

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances

rational decisions about finances.

Disability. My physical disability causes me

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	Case 15-43171	Doc 1	Filed 12/23/15 Document	Entered 12/23/15 13: Page 6 of 56	15:06	Desc Main
Debtor 1	Chiquita First Name Middle Nam	ne Last	ampton Name	Case number (if know)	7)	
Part 6:	Answer These Que	stions for Re	porting Purposes			
	it kind of debts do have?	No. (2) Yes.	Go to line 16b. Go to line 17. Gr debts primarily buser a business or investment of the 17. Go to line 16c. Go to line 17.	nsumer debts? Consumer debts arily for a personal, family, or house siness debts? Business debts are not or through the operation of the business debts are not consumer debts or busin	rhold purpo	se."
Do ye any e exclu admi are p avail	you filing under oter 7? ou estimate that after exempt property is uded and nistrative expenses aid that funds will be able for distribution secured creditors?	Yes. I am t	0	Go to line 18. you estimate that after any exemplid that funds will be available to dis	l property is	s excluded and insecured creditors?
8. How you e owe?	many creditors do estimate that you	☐ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999		1,000-5,000 5,001-10,000 10,001-25,000	5 0,0	001-50,000 001-100,000 e than 100,000
	much do you ate your assets to orth?	✓ \$0-\$50,000 □ \$50,001-\$1 □ \$100,001-\$ □ \$500,001-\$	00,000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$1,0 \$10,	0,000,001-\$1 billion 00,000,001-\$10 billion 000,000,001-\$50 billion e than \$50 billion
	ate your liabilities ?	\$0-\$50,000 \$50,001-\$1 \$100,001-\$ \$500,001-\$	00,000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$1,00 \$10,0	0,000,001-\$1 billion 00,000,001-\$10 billion 000,000,001-\$50 billion e than \$50 billion
or you	1	if I have choser of title 11, Unite under Chapter f no attorney re	n to file under Chapter 7, I d States Code. I understa 7. presents me and I did no	are under penalty of perjury that the am aware that I may proceed, if eland the relief available under each of the pay or agree to pay someone who the notice required by 11 U.S.C. 8	igible, unde chapter, an	er Chapter 7, 11,12, or 13 d I choose to proceed

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

* Chaula Hamptons	K
Signature of Debtor 1	Signature of Debtor 2
Executed on MM / DD /YYYY	Executed on MM / DD / YYYY

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Page 7 of 56 Document

Desc Main Chiquita Debtor 1 Hampton Case number (if known)_ For you if you are filing this The law allows you, as an individual, to represent yourself in bankruptcy court, but you bankruptcy without an should understand that many people find it extremely difficult to represent attorney themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney. If you are represented by an attorney, you do not To be successful, you must correctly file and handle your bankruptcy case. The rules are very need to file this page. technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned. If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? ☐ No Yes Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? ☐ No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

Date

Contact phone

Cell phone

Email address

Signature of Debtor 2

MM / DD / YYYY

Date

Contact phone

Cell phone

Email address

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 8 of 56

Debtor 1	Chiquita	N	Hampton
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I Case number (If known)	Bankruptcy Court for	the: Northern District of Illine	ois

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Did ye	ou pay or agree to pay someone who is NOT an att	orney to help you fill out bankruptcy forms?	
,	es. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and	
		Signature (Official Form 119).	
			:
Unde	penalty of perjury, I declare that I have read the s	ummary and schedules filed with this declaration and	
ulat u	iey are true and correct.		
x (higuta Hanter*		
Signa	ture of Debtoky	Signature of Debtor 2	
Date	12 23 2015 MM/ DD / YYYY	Date MM / DD / YYYY	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 9 of 56

Debtor 1	Chiquita	N	Hampton
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing	j) First Name	Middle Name	Last Name

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	0.50
1c. Copy line 63, Total of all property on Schedule A/B	\$ 850.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ <u>17,193.00</u>
Your total liabilities	\$17,193.00
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,722.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	s1,725.00

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 10 of 56

Debtor 1

Chiquita First Name Hampton Case number (if known)_

Part 4: Answer These Questions for Administrative and Statistical Records	5	
 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this f ☑ Yes 	form to the court with your other	schedules.
 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by arr family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. Your debts are not primarily consumer debts. You have nothing to report on this par 	oses. 28 U.S.C. § 159.	
this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	\$ 822.00
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following:	Total claim	y var egyte genera y ne minnede silvy etterné stransministration and state transministration from the charlest and state the charlest and the
9a. Domestic support obligations (Copy line 6a.)	\$0.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00	
9d. Student loans. (Copy line 6f.)9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00	
9g. Total . Add lines 9a through 9f.	\$	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Page 11 of 56 Document

Debtor 1	Chiquita	N	Hampton
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filing)	First Name	Middle Name	Last Name
Jnited States	Bankruptcy Court for	the: Northern District of I	llínois

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	o. Go to Part 2. es. Where is the property?			interpretation of the second of the second
1.1.	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured clithe amount of any secure Creditors Who Have Clair	nims or exemptions. Put diclaims on Schedule D:
	City State ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check one.	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co	mmunity property
If you	own or have more than one, list here: Street address, if available, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building		ims or exemptions. Put diclaims on Schedule D:
	Sueet address, if available, of other description	Condominium or cooperative Manufactured or mobile home Land Investment property	Current value of the entire property?	Current value of the portion you own?
	City State ZIP Code	Timeshare Other Who has an interest in the property? Check one.	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:		mmunity property

Documentote Page 12 of 56 Debtor 1 What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home 1.3 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land ☐ Investment property Describe the nature of your ownership City ☐ Timeshare State ZIP Code interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Who has an interest in the property? Check one Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 32 Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions)

Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main

Case 15-43171

Doc 1

Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Case 15-43171 Doc 1 Documembre Page 13 of 56 number (if known) Debtor 1 Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the
Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the
Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Check if this is community property (see

instructions)

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Chiquita N Document pt Page 14 of 56 Case number (if known)

Debtor 1

Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value portion you of Do not deduct so or exemptions.	own?
6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No		
	Yes. Describe Resale stove and refrigerator	\$	300.00
7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ✓ No ✓ Yes. Describe	S	250.00
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe		
	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.	\$	
	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe	\$	MARTINIA II Alaksius vientai karai usuka sika sika sika sika sika sika sika si
	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe	\$	300.00
	Jeweiry Examples: Everyday jeweiry, costume jeweiry, engagement rings, wedding rings, heirloom jeweiry, watches, gems, gold, silver No		
13. l	Yes. Describe Non-farm animals Examples: Dogs, cats, birds, horses	\$	
	No Pes. Describe	\$	
١	Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific	***************************************	,
	information	\$	
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$	<u>850.00</u>

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Documente Page 15 of 56 number (if known)

Chiquita

Debtor 1

Part 4: Describe Your Financial Assets

o you own or na	ve any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Cash <i>Examples:</i> Mon	ey you have in your wallet, in your home, in a safe deposit box, and on ha	and when you file your petition
☑ No ☐ Yes		
	oney cking, savings, or other financial accounts; certificates of deposit; shares i other similar institutions. If you have multiple accounts with the same insti	
🗹 No	·	
☐ Yes	Institution name:	
	17.1. Checking account:	\$
	17.2. Checking account:	•
	-	\$
		\$
	17.5. Certificates of deposit:	\$
	17.6. Other financial account:	\$
	17.7. Other financial account:	\$
	17.8. Other financial account:	\$
	17.9. Other financial account:	\$
•	funds, or publicly traded stocks I funds, investment accounts with brokerage firms, money market account Institution or issuer name:	\$
		\$
		\$
	raded stock and interests in incorporated and unincorporated busine rship, and joint venture	esses, including an interest in
☑ No	Name of entity:	% of ownership:
	pecific	
Yes. Give sp	ahout	
Yes. Give spinformation them	about	

Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Case 15-43171 Doc 1 Document Page 16 of 56 Debtor 1 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Mo No Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☑ No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA. Retirement account: Keogh. Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Mo No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: ____ Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ☑ No Yes Issuer name and description:

Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Case 15-43171 Doc 1 Documenta Page 17 of 56 number (if known)

Debtor 1

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Z No 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit 2 No Yes. Give specific information about them... \$ 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ No Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **☑** No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☑ No ☐ Yes. Give specific information Federal about them, including whether you already filed the returns State and the tax years..... Local 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ Yes. Give specific information.....

	First Name Middle Name	Last Name	Page 18 0556	
	in insurance policies :: Health, disability, or life insu	rance; health savings account (HS	SA); credit, homeowner's, or renter's insurance	
Yes. 1	Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:

		M		<u> </u>
		***************************************		\$
If you are	est in property that is due yo the beneficiary of a living trust ecause someone has died.	ou from someone who has died t, expect proceeds from a life insur	rance policy, or are currently entitled to receive	
	Bive specific information			**************************************
- 103.0	ove specific intomiation			\$
Examples No	: Accidents, employment dispu	or not you have filed a lawsuit outes, insurance claims, or rights to	or made a demand for payment sue	rone and state
Yes. D	escribe each claim			**************************************
No Set off	tingent and unliquidated cla claims escribe each claim	nims of every nature, including c	counterclaims of the debtor and rights	\$
	cial assets you did not alrea	dy list		
☑ No ☐ Yes. G	ive specific information			\$
. Add the d for Part 4.	ollar value of all of your entr Write that number here	ies from Part 4, including any e	ntries for pages you have attached	s 0.00
	and the second s			
art 5: D	escribe Any Business	-Related Property You O	wn or Have an Interest In. List any	real estate in Part 1.
. Do you ow	n or have any legal or equit	able interest in any business-rel		real estate in Part 1.
7. Do you ow	on or have any legal or equita to Part 6.			real estate in Part 1.
. Do you ow	n or have any legal or equit			Current value of the portion you own? Do not deduct secured claims
. Do you ow No. Go Yes. G	n or have any legal or equita to Part 6. o to line 38,	able interest in any business-rel		Current value of the portion you own?
Do you ow No. Go	on or have any legal or equita to Part 6.	able interest in any business-rel		Current value of the portion you own? Do not deduct secured claims
. Do you ow No. Go Yes. G	rn or have any legal or equita to Part 6. o to line 38.	able interest in any business-rel		Current value of the portion you own? Do not deduct secured claims
. Do you ow No. Go Yes. G Accounts to No Yes. Do	rn or have any legal or equitate to Part 6. to to line 38. receivable or commissions y	able interest in any business-rel		Current value of the portion you own? Do not deduct secured claims
7. Do you ow No. Go Yes. G B. Accounts in No Yes. Do Office equ Examples: B	rn or have any legal or equitate to Part 6. to Part 6. to to line 38. receivable or commissions y escribe	able interest in any business-rel		Current value of the portion you own? Do not deduct secured claims or exemptions.
7. Do you ow 2 No. Go 2 Yes. G	rn or have any legal or equitate to Part 6. to Part 6. to to line 38. receivable or commissions y escribe	able interest in any business-rel	lated property?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main

Entered 12/23/15 13:15:06 Desc Main Doc 1 Filed 12/23/15 Document Page 19 of 56 Chiquita Debtor 1 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade □ No Yes. Describe... 41. Inventory ☐ No Yes. Describe... 42. Interests in partnerships or joint ventures Yes. Describe..... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? Mo. Go to Part 7. Yes. Go to line 47. Current value of the

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

portion you own?

Do not deduct secured claims

or exemptions.

Documentote Page 20 of 56 Debtor 1 48. Crops-either growing or harvested ☐ No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ Yes 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership 2 No Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 0.00 55 Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 850.00 57. Part 3: Total personal and household items, line 15 0.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 850.00 850.00 62. Total personal property. Add lines 56 through 61, Copy personal property total -> 850.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

Case 15-43171

Doc 1

Filed 12/23/15

Entered 12/23/15 13:15:06

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 21 of 56

Debtor 1	hiquita	N	Hampton
Fin	rst Name	Middle Name	Last Name
Debtor 2			
Spouse, if filing) Fin	rst Name	Middle Name	Last Name

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

Brief description of the propert Schedule A/B that lists this pro	y and line on Current value	
	Copy the value Schedule A/B	
Brief description:	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit
Brief description:	\$	 \$
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit
Brief description:	\$	G \$
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 22 of 56 Hampton Case number (if known)

Debtor 1

Chiquita First Name

Case number (if known)

Part 2: **Additional Page**

Brief description of the property ar on Schedule A/B that lists this pro	nd line Current value of the perty portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	_ 🗆 \$	
Line fromSchedule A/B.		100% of fair market value, up to any applicable statutory limit	
Brief description:	 \$	_ 🗆 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	_ 🛄 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	_ Q \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	<u> </u>	_ 🗆 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: ————————————————————————————————————	<u> </u>		
Line from Schedule A/B: ————		☐ 100% of fair market value, up to any applicable statutory limit	
Brief lescription:	\$	3 \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief lescription:	\$	- \$	
ine from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	1-70-17884444
Brief lescription; ————————————————————————————————————	\$	 \$	
ine from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	44 40 1 1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Brief escription:	\$		
ine from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 23 of 56

Fill in this i	nformation to identify y	our case:					
Debtor 1	Chiquita	N	Hampton				
	First Name	Middle Name	Last Name	•••			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the: N	lorthern District of	Illinois				
Case number							
(if known)						Check i amende	-
						amendo	od ming
Official	Form 106D						
Sched	lule D: Cred	itors Wh	o Have Claims	s Secure	ed by Prop	erty	12/15
			arried people are filing toget				
	i. If more space is neede pages, write your name		litional Page, fill it out, numb r (if known).	er the entries,	and attach it to this	form. On the top of	any
·			,				
	reditors have claims se		operty? ourt with your other schedules	Vau hava nathi	na alca ta ranart an ti	nie form	
	fileck trils box and submit fill in all of the information		ourt with your other schedules	. Tou nave noun	rig eise to report on ti	iis iQiIII.	
Part 1: L	ist All Secured Clain	ns					
2. List ali se	cured claims. If a credit	or has more than	one secured claim, list the cre	ditor separately	Column A Amount of claim	Column B Value of collateral	Column C Unsecured
for each o	laim. If more than one ci	reditor has a parti	cular claim, list the other credit order according to the creditor	tors in Part 2.	Do not deduct the	that supports this	portion
and the second	as possible, list the claim	s in alphabetical c	adel according to the creditor	S Hame.	value of collateral.	claim	lfany
2.1		Describ	e the property that secures th	e claim:	\$	\$	\$
Creditor's Na	ame						
Number	Street						
		parts.	ie date you file, the claim is: C	heck all that apply.			
		Con	*				
City	State ZIP	Code Disp					
Who owes	the debt? Check one.	Nature	of lien. Check all that apply.				
Debtor 1 Debtor 2	•		agreement you made (such as mor oan)	tgage or secured			
	only and Debtor 2 only		utory lien (such as tax lien, mecha	nic's lien)			
At least	one of the debtors and anoth	101	gment lien from a lawsuit				
☐ Check	if this claim relates to a	∟ Oth	er (including a right to offset)	··········	_		
	inity debt vas incurred	laet 4 /	ligits of account number				
2.2	AGS IIICALLEG	CONTRACTOR	e the property that secures th	e claim.	S	\$	S.
Creditor's N	ame	Describ	the property that secures the		1		
	Observation						
Number	Street	As of th	e date you file, the claim is: C	heck all that apply.	_]		
		🔲 Con	· · · · · · · · · · · · · · · · · · ·	,,,,			
City	State ZIP	Code Dior	1				
	the debt? Check one.	- Dist					
Debtor 1			of lien. Check all that apply. greement you made (such as mor	tnane or secured			
Debtor 2	•	carl	oan)				
	and Debtor 2 only	ra	utory lien (such as tax lien, mecha gment lien from a lawsuit	nic's tien)			
	one of the debtors and anoth		gment lien from a lawsuit er (including a right to offset)		_		
	if this claim relates to a inity debt		· · · · · · · · · · · · · · · · · · ·				
Data dalif	uncy work	1 004 4 -	ligite of account number				

Add the dollar value of your entries in Column A on this page. Write that number here:

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main

Document

Page 24 of 56

Debtor 1

Chiquita N Hampton Case number (if known)______

Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column 8 Value of collateral that supports this claim	is portion	
	Describe the property that secures the claim:	\$	\$	\$	
Creditor's Name	Property from Local Control of Control				
Number Street	-				
THATTAGE SHEET	THE				
	- As of the date you file, the claim is: Check all that apply.	•			
	☐ Contingent				
City State ZIP Code	Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage or secured				
Debtor 2 only	car ioan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit				
At least one of the debtors and another	Other (including a right to offset)				
☐ Check if this claim relates to a	United (including a right to onset)	•			
community debt					
Date debt was incurred	Last 4 digits of account number				
The control of the co	Describe the property that secures the claim:	\$	\$	\$	
Creditor's Name	-				
Number Street	-				
Number Street	An after date of the state of t				
	As of the date you file, the claim is: Check all that apply. Claim is: Check all that apply.				
	Unliquidated				
City State ZIP Code	Disputed				
Who owes the debt? Check one.					
Debtor 1 only	Nature of lien. Check all that apply.				
Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) 				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and another	Judgment lien from a lawsuit				
Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred	Last 4 digits of account number				
encomment may require a graph of providing an angual of the market of the state of	Describe the property that secures the claim:	sentialen una esperano anterior anterio	**************************************	**************************************	
Creditor's Name		T			

Number Street					
	As of the date you file, the claim is: Check all that apply.				
	Contingent				
City State ZIP Code	Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage or secured)				
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and another	Judgment lien from a lawsuit				
Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				
program programme and the second of the programme and the	AND CONTRACTOR OF THE STANDARD CONTRACTOR OF THE				
Add the dollar value of your entrie	s in Column A on this page. Write that number here:	\$			
If this is the last page of your form. Write that number here:	, add the dollar value totals from all pages.	\$			

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 25 of 56

Debtor 1

Chiquita		N		Hampton
First Name	Middle Name		Last Name	

Case number (if known)__

Part 2:	List Oth	ers to Be Notified f	or a Debt Th	at You Already List	ed
agency is	s trying to col	lant fram way far a daht	you owe to sor e debts that you	neone else, list the cre Lilisted in Part 1, list the	t that you already listed in Part 1. For example, if a collection ditor in Part 1, and then list the collection agency here. Similarly, if additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
Name)				Last 4 digits of account number
Numb	er Street				
City		4.500	State	ZIP Code	
in reference arounds were	entiren da makasina de activação estinação (Constituis Este	હામ્મદ્રભાર કોમ્મકેલનોન મહિલે કે દિવસે કેટલેલને કેમ્પ્રકાર પહોંકે મહેરાન માટે કરાઇન્ટ્રે નિર્દે નહીંગા જે નહીંગા કારણ કમ્મમ	ende historiat et entlend glissens sprinnes sprinning mand purs unt etc.	ومجافئ أو الأنساب الأواج والمسداء مداور الإ أن المسابد المحافقة والمراجع مهاب ميث برائي ويسابد .	On which line in Part 1 did you enter the creditor?
Name)				Last 4 digits of account number
Numb	per Street				
City			State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
Name	9				Last 4 digits of account number
Numi	ber Street			- 11111	
	1470		State	ZIP Code	
City		Tale to common account of the state of tale tale to the state of the s		estandement de en de statistisk kannet menenge i en en en statistisk menenge	On which line in Part 1 did you enter the creditor?
Nam	e				Last 4 digits of account number
Num	ber Stree				
-	<u> </u>				
City			State	ZIP Code	
50/20/09(4)00/4000 v 111	entisted y we story a manner or COMMING YAMITAN AND	ensservel ensisterials esservelet esservens an seur side e exercisió se essere a senemen e sobissión se esserv	mag sey er men deminde had direct to be the first to extend on the	ente a contrata por progresio por mente a contrata de contrata de como en contrata de contrata de contrata de c	On which line in Part 1 did you enter the creditor?
Nam	ie				Last 4 digits of account number
Num	nber Stree	ť			
City	#		State	ZIP Code	. In the second control of the second contro
000000000000000000000000000000000000000	, televisia, ta comunicate de la Gallot Santologo de este en en	ኤኤ. ሲፈው ያ-ፈላርር መታ ው ያቀምሉ ፋ እና 600 አቀ በ5 ርቅር ያመንፈው ላይ ያቀምሉ ለ 18 የተመፈ ነር ዕላቸውን ያለገር መም ነ ነው ምት	では、 1997年 - 本本の本人でいることのようです。 1997年 - 本本の本人でいることのようです。 1997年 - 本本の本人でいることのようです。 1997年 - 本本の本人でいることのようです。 1997年 - 本本の本人でいることのようです。 1997年 - 本本の本人でいることのようです。 1997年 - 本本の本人でいることのようでは、 1997年 - 本本の本の本の本の本の本の本の本の本の本の本の本の本の本の本の本の本の本の	PPHIER CAN SENSO VICEOUS EXAMPLES THAT THE PROPERTY OF THE THAT THE PROPERTY OF THE THAT THE PROPERTY OF THE THAT THE THE THAT THE THE THE THE THE THE THE THE THE TH	On which line in Part 1 did you enter the creditor?
Nam	те				Last 4 digits of account number
Nun	nber Stree	et			
			· · · · · · · · · · · · · · · · · · ·		
City			State	ZIP Code	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main

Fill in this i	nformation to ide	ntify your case:	
Debtor 1	Chiquita	N	Hampton
Debtor 2	First Name	Middle Name	Last Name
(Spouse, if filing	i) First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the: Northern District of I	llinois
Case number (If known)			

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	art 1: List All of Your PRIORITY Unsecure	ed Claims			
	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the	editor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's na Part 1. If more than one creditor holds a particular claim.	at claim here an ime. If you have	d show both more than to	oriority and wo priority
2.1	Priority Creditor's Name	Last 4 digits of account number	\$		
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		espinagoponopolikomonika kalinikakkiki kikinto	ikinggggggggggggggggggggggggggggggggggg
2.2	Priority Creditor's Name	Last 4 digits of account number	\$	\$	_ \$
	Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			
	☐ Yes				

Debtor 1

Case 15-43171	Doc 1	Filed 12/23/15	Entered 12/23/15 13:15:06	Desc Main
Criquita	N N	— Document ampron	Page 27 of \$6 number (if known)	

naung ang enures on uns page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total cleim Priority Nonp amount amou
Priority Creditor's Name	Last 4 digits of account number	\$\$\$\$
Fridity Creditor's Name		
Number Street	When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
	Type of BRIODITY unpopulated alaims	
☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations	
 → Debtor 1 and Debtor 2 only → At least one of the debtors and another 	Taxes and certain other debts you owe the government	
	Claims for death or personal injury while you were	
☐ Check if this claim is for a community debt	intoxicated	
· ·	Other. Specify	
s the claim subject to offset?		
□ No		
☐ Yes		
	Last 4 digits of account number	\$ \$ \$
Priority Creditor's Name		
	When was the debt incurred?	
lumber Street		
	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent	
ity State ZIP Code	Unliquidated	
	Disputed	
Vho incurred the debt? Check one.		
Debtor 1 only	Type of PRIORITY unsecured claim:	
Debtor 2 only	••	
Debtor 1 and Debtor 2 only	Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the government	
	 Claims for death or personal injury while you were intoxicated 	
☐ Check if this claim is for a community debt	Other. Specify	
s the claim subject to offset?	· · · · · · · · · · · · · · · · · · ·	
-		
□ No		
Yes		The contract of the contract o
	Last 4 digits of account number	\$ \$ \$
riority Creditor's Name		
	When was the debt incurred?	
umber Street		
	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent	
Sity State ZIP Code	Unliquidated	
ony State 21F CODE	Disputed	
Vho incurred the debt? Check one.	— Disputor	
Debtor 1 only	Type of PRIORITY unsecured claim:	
Debtor 2 only		
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the government	
At least the of the depicts still situities	Claims for death or personal injury while you were	
☐ Check if this claim is for a community debt	intoxicated Other. Specify	
	■ Other, Specify	
s the claim subject to offset?		
□ No		
Yes		

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Chiquita N Document pton Page 28 of 56 number (if known)

Chiquita	
----------	--

Debtor 1

Pa	rt 2: List All of Your NONPRIOR	ITY Uns	ecured Claim	\$		
	Do any creditors have nonpriority unsum. No. You have nothing to report in this Yes	part. Sul	omit this form to t		v november	
	List all of your nonpriority unsecured or	claims in tor separ tor holds	the alphabetica	Il order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do not i, list the other creditors in Part 3.If you have more than three not	more list cla	than one ims already
1	ComEd Customer Care Center			Last 4 digits of account number 1 3 9 3	Tota	1,850.00
	Nonpriority Creditor's Name P.O. Box 805379 Chi			When was the debt incurred? 01/25/2015	\$	1,000.00
	Number Street			_		
		IL. State	60680 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. ☑ Debtor 1 only			Contingent Unliquidated Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a communits the claim subject to offset? ☑ No ☐ Yes	ity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify		
2	Peoples Energy	rya (owyywoard kobelożnich ol	oodt makkil deel Sistem stand of Sinds Sin	Last 4 digits of account number $\frac{1}{2}$ $\frac{9}{3}$	\$	2,026.00
	Nonpriority Creditor's Name 200 E Randolph St	******		When was the debt incurred? 09/11/2012		
		IL State	60601 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. ☑ Debtor 1 only	State	zir ddd	☐ Contingent ☐ Unliquidated ☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a commun	ity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 		
	Is the claim subject to offset? ☑ No ☑ Yes			Other. Specify	20-08-6	DOCK SECTOMÁ Joseph Jos
.3	City of Chicago Dept of Revenu	ıe	200 C 60 A	Last 4 digits of account number1393 When was the debt incurred? 12/01/2011	\$	3,500.00
	121 N LaSalle St Rm 107A Number Street			When was the dept mounted:		
	Chicago City	IL State	60602 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.			☐ Contingent ☐ Unliquidated		
	Debtor 1 only Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a commun	ity debt		Student loans Obligations arising out of a separation agreement or divorce		
	is the claim subject to offset? ✓ No ☐ Yes			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	;	

Debtor 1

Case Ulfa-43171 Dec 1 Filed 12/23/15 13:15:06 Desc Main First Name Middle Name Last Nam Document Page 29 of 56

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

4 ENHANCED RECOV	ERY COMPANy		Last 4 digits of account number 1 3 9 3	_{\$} 1,260.0
PO BOX 57547			When was the debt incurred? 09/02/2014	
Number Street Jacksonville	FL	32241	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Chi	eck one.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors	and another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for	r a community debt		you did not report as priority claims	
Is the claim subject to offse	et?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
☑ No			Guier. Specify	
Yes				
US Dept of Education	entral annual y ang gantan annual	opting yn open cyfeddiaeth Arlandiaeth Arlandiaeth Arlandiaeth Arlandiaeth Arlandiaeth Arlandiaeth Arlandiaeth	Last 4 digits of account number 1 3 9 3	s 2,600.0
Nonpriority Creditor's Name			-	Ψ
3015 Parker Rd 400 Number Street		1-70-7/10/10/10	When was the debt incurred? 02/24/2011	
Aurora	co	80014	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	eck one		Unliquidated	
Debtor 1 only	JON OHE.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors a	and another		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
Check if this claim is for	a community daht		you did not report as priority claims	
	•		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offse	17		Other. Specify	
☑ No ☐ Yes				
MATCH CAL DISCHARGE		na waa shijaanay sa aadaka ah amaan ah aa ah	Last 4 digits of account number 1 3 9 3	_{\$_} 1,115.0
MEDICAL BUSINESS Nonpriority Creditor's Name	DUKEAU		-	
1460 RENAISSANCE	D 400		When was the debt incurred? 06/30/2015	
Park Ridge	IL.	60068	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	al. aaa		Unliquidated	
_	ck one.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors a	nd another		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for	a community dobt		you did not report as priority claims	
	-		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset	17		Other. Specify	
₩ No				

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main

Debtor 1

Chiquita

Documentipton Page 30 of 56 number (if known)

Part 3:

List Others to Be Notified About a Debt That You Already Listed

			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			•
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		··	Part 2: Creditors with Nonpriority Unsecured Clair
	***************************************		Last 4 digits of account number
City	State	ZIP Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
varrie			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
Confliction on And September (September) and september (september) contains to the contains and			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
CHECKE CONTROL OF THE	der-reservationers of the engineering program in the engineering of th	and the regiment constraints a series of the constraint of the constraints of the constra	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
CONTRACTOR		\$0.52,000(1,2700+0,000)/n+~2,v/+~0009/29/	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
	State	ZIP Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
1			
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Name Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured

Debt

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Chiquita Page 31 of St number (if Annown)

Your NONPRIORITY Unsecured Claims — Continuation Page

listing any entries on this pag			and the grown and the control of the modification of the state of the control of the state of the state of the	
Medical Business Bureau			Last 4 digits of account number 1 3 9 3	\$ 1,100.
Nonpriority Creditor's Name			When was the debt incurred? 04/23/2015	
1460 Renaissance D 400			TEHRIF TYRO GIR GOM INCUITED:	
Number Street Jacksonville	FL	32241	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check or	\ <u></u>		Unliquidated	
Debtor 1 only	ie.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	-		Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
₩ No				
Yes				e-Landario 482000000000000000000000000000000000000
MERCHANTS CREDIT G	UIDE	opposessen group versus op de de state en versus de state en versus de state en de state de state de state de d	Last 4 digits of account number 1 3 9 3	s <u>2,542</u>
Nonpriority Creditor's Name			When was the debt incurred? 07/14/2014	
223 W JACKSON ST 900)		- Trick was the described as	
Number Street Chicago	1L	60606	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
			Unliquidated	
Who incurred the debt? Check or	ne.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and a	nother		 Student loans Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
	uont		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ✓ No			Other. Specify	
Yes				N-600-0-5-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0
Merchants Credit Guide	rangement i recept ne volumente de la filma de la film	enganessa. Leen er comande er oppstande flesk die een voor de falle vijd in Agreef die Arthur Afrika die Afrika	Last 4 digits of account number 1 3 9 3	_{\$1,200}
Nonpriority Creditor's Name			When was the debt incurred? 03/30/2015	
223 W Jackson St 900			when was the dept incurred?	
Number Street	IL.	60606	As of the date you file, the claim is: Check all that apply.	
Chicago City	IL State	ZIP Code	Contingent	
•			☐ Unliquidated	
Who incurred the debt? Check or	ne.		☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only				
At least one of the debtors and a	nother		 ☑ Student loans ☑ Obligations arising out of a separation agreement or divorce that 	
			you did not report as priority claims	
Check if this claim is for a co	Jimiliumity debt		Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?			Other. Specify	
☑ No				

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$ 0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$0.00
				Total claim
Total claims	6f.	Student loans	6f.	s 2,600.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$14,593.00
	6j.	Total. Add lines 6f through 6i.	6j.	s 17,193.00

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 33 of 56

					le 33 01 30			
ill in this	information to iden	ntify your case:						
Debtor	Chiquita	N	and the control of the second	Hampton				
	First Name	Middle Name		Last Name				
Debtor 2 Spouse If filin	g) First Name	Middle Name		Last Name				
inited State	s Bankruptcy Court for	the: Northern Distri	ict of Illinois					
Case numbe	er							
(If known)								Check if this amended fili
	Form 106G		Contra	cts and	Unexpire	d Leas	es	12/1
ditional p Do you No. Yes List sep	have any executor. Check this box and for the information of the information of the person	y contracts or un file this form with the rmation below ever n or company wit	nber (if know expired leas- ne court with y n if the contra th whom you	es? your other scheducts or leases are	mber the entries, an ules. You have nothin listed on Schedule A.	ng else to repor /B: Property (C	t on this form fficial Form 1	i. 106A/B).
Person	ed leases. or company with w		en egya		in the instruction boo	he contract o	sa Nova Nasa	
unexpire	ed leases.		en egya		in the instruction boo	the contract o	sa Nova Nasa	
Person	ed leases.		en egya		in the instruction boo	he contract o	sa Nova Nasa	
Person Name	or company with w	/hom you have th	e contract o		in the instruction boo	he contract o	sa Nova Nasa	
Person Name Number	or company with w		e contract o		in the instruction boo	he contract of	sa Nova Nasa	
Person Name Number City	or company with w	/hom you have th	e contract o		in the instruction boo	he contract of	sa Nova Nasa	
Person Name Number	or company with w	/hom you have th	e contract o		in the instruction boo	the contract o	sa Nova Nasa	
Person Name Number City	or company with w	/hom you have th	e contract o		in the instruction boo	the contract of	sa Nova Nasa	ricon handi di si ma di faritani ni sa alma si ma un'ili sa dana si sa alma si ma un'ili sa dana si sa alma si
Person Name Number City Name	or company with w	/hom you have th	e contract o		in the instruction boo	the contract of	sa Nova Nasa	
Person Name Number City	or company with w	/hom you have th	e contract o		in the instruction boo	the contract of	sa Nova Nasa	
Person Name Number City Name Number	or company with w	/hom you have th	e contract o		in the instruction boo	The contract of	sa Nova Nasa	
Name Number City Name Number	Street Street	/hom you have th	e contract o		in the instruction boo	AMAZIONA DI DI TITO DI	sa Nova Nasa	
Name Number City Name Number	or company with w	/hom you have th	e contract o		in the instruction boo	the contract of	sa Nova Nasa	
Name Number City Name Number	Street Street	/hom you have th	de contract o		in the instruction boo	The contract of	sa Nova Nasa	
Name Number City Name Number Number	Street Street	State ZIP Co	de contract o		in the instruction boo	the contract of	sa Nova Nasa	
Name Number City Name Number City Name Number City	Street Street	State ZIP Co	de contract o		in the instruction boo	The contract of	sa Nova Nasa	
Name Number City Name Number City Name Number City Name	Street Street Street	State ZIP Co	de contract o		in the instruction boo	The contract of	sa Nova Nasa	
Name Number City Name Number City City City City City City City City	Street Street	State ZIP Co	de contract o		in the instruction boo	the contract of	sa Nova Nasa	

Name

Number

City

Street

State

ZIP Code

Case 15-43171 Doc 1

Document

Hampton

Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Page 34 of 56

Debtor 1

Chiquita

Case number (if known

Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 2.<u>2</u> Name Number Street City State ZIP Code Name Number Street City ZIP Code State Name Number Street City State ZIP Code Name Number Street City ZIP Code State 2._ Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code Name Street Number ZIP Code City State

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 35 of 56

Chiquita	N	Hampton
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
		First Name Middle Name

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	☑ No	ebtors? (If you are filing a joint case, do no	list either spouse as a codebtor.)	
	☐ Yes			
			y state or territory? (Community property states and partico, Texas, Washington, and Wisconsin.)	d territories include
	No. Go to line 3.			
	🔲 Yes. Did your spoι	ise, former spouse, or legal equivalent live	vith you at the time?	
	☐ No			
	Yes. In which o	community state or territory did you live?	Fill in the name and current add	ress of that person.
	Name of your spou	ıse, former spouse, or legal equivalent		
	Number SI	reet		
			····	
	City	State	ZIP Code	
!	Schedule D (Official)	n as a codebtor only if that person is a g Form 106D), <i>Schedule E/F</i> (Official Form redule G to fill out Column 2.	ouse as a codebtor if your spouse is filing with your arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use	e creditor on Schedule D, (Approximation of the section in the
!	Schedule D (Official Schedule E/F, or Sch	n as a codebtor only if that person is a g Form 106D), <i>Schedule E/F</i> (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed th 106E/F), or <i>Schedul</i> e G (Official Form 106G). Use	e creditor on Schedule D, o whom you owe the debt
	Schedule D (Official Schedule E/F, or Sch	n as a codebtor only if that person is a g Form 106D), <i>Schedule E/F</i> (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that	e creditor on Schedule D, o whom you owe the debt apply:
	Schedule D (Official Schedule E/F, or Sch	n as a codebtor only if that person is a g Form 106D), <i>Schedule E/F</i> (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that	e creditor on Schedule D, o whom you owe the debt apply:
	Schedule D (Official Schedule E/F, or Sch Column 1: Your code	n as a codebtor only if that person is a g Form 106D), <i>Schedule E/F</i> (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that	e creditor on Schedule D, o whom you owe the debt apply:
	Schedule D (Official Schedule E/F, or Sch Column 1: Your code	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line Schedule E/F, line Schedule G, line	e creditor on Schedule D, o whom you owe the debt apply:
3.1	Schedule D (Official Schedule E/F, or Sch Column 1: Your code	n as a codebtor only if that person is a g Form 106D), <i>Schedule E/F</i> (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line Schedule E/F, line	e creditor on Schedule D, o whom you owe the debt apply:
3.1	Schedule D (Official Schedule E/F, or Sch Column 1: Your code Name Number Street City	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line Schedule E/F, line Schedule G, line	e creditor on Schedule D, o whom you owe the debt apply:
3.1	Schedule D (Official Schedule E/F, or Sch Column 1: Your code	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line Schedule E/F, line Schedule G, line	e creditor on Schedule D, o whom you owe the debt apply:
3.1	Schedule D (Official Schedule E/F, or Sch Column 1: Your code Name Number Street City	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line	e creditor on Schedule D, o whom you owe the debt apply:
3.1	Schedule D (Official Schedule E/F, or Sc	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form redule G to fill out Column 2.	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line	e creditor on Schedule D, o whom you owe the debt apply:
3.1	Schedule D (Official Schedule E/F, or Sch Column 1: Your code Name Number Street Name Number Street	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form nedule G to fill out Column 2. sbtor State	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line	e creditor on Schedule D, o whom you owe the debt apply:
3.1	Schedule D (Official Schedule E/F, or Sch Column 1: Your code Name Number Street Name Number Street	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form nedule G to fill out Column 2. sbtor State	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule D, line	e creditor on Schedule D, o whom you owe the debt apply:
!	Schedule D (Official Schedule E/F, or Sch Column 1: Your code Name Number Street City Name City Name	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form nedule G to fill out Column 2. sbtor State	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule E/F, line	e creditor on Schedule D, o whom you owe the debt apply:
3.1	Schedule D (Official Schedule E/F, or Sc	n as a codebtor only if that person is a g Form 106D), Schedule E/F (Official Form nedule G to fill out Column 2. sbtor State	arantor or cosigner. Make sure you have listed the 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to Check all schedules that Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule D, line	e creditor on Schedule D, o whom you owe the debt apply:

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Hampton Page 36 of 56 Case number (# known)

Chiquit First Name

Debtor 1

quita	N	
Marso	Middle Massa	/ NI

		Additional Page to List Mo	ore Codebtors			
, (Abbahan)	Column	1: Your codebtor			Col	umn 2: The creditor to whom you owe the debt
3					Ch	eck all schedules that apply:
	Name					Schedule D, line
	Name					Schedule E/F, line
www.pr	Number	Street				Schedule G, line
	City		State	ZIP Code		
3						TOTAL CONTROL OF THE
	Name	T-1/2-1				Schedule D, line
						Schedule E/F, line
-	Number	Street				Schedule G, line
<u></u>	City	79.11	State	ZIP Code	/ \	
3	*****				П	Schedule D, line
	Name					Schedule E/F, line
	Number	Oliver to the second se				Schedule G, line
	Number	Street				Scriedule S, file
<u></u>	City		State	ZIP Code	· Secretaria de maioria	
3						Octobrillo D. Para
	Name					Schedule D, line
						Schedule E/F, line
	Number	Street			_	Schedule G, line
<u></u>	City	the first harder statement and a statement and a statement and the statement and the statement and a statement	State	ZIP Code		
3	-				П	Schedule D, line
	Name					Schedule E/F, line
	Number	Chront				Schedule G, line
	INDITIDE	Street			*****	Soliedule G, line
	City		State	ZIP Code		
3	Al		· · · · · · · · · · · · · · · · · · ·			Schedule D, line
:	Name					Schedule E/F, line
	Number	Street				Schedule G, line
	City		State	ZIP Code	n eun einstyweig von	arathur 1900 ti ur anggur 1911, princi de las gar complete la la maragala maja planta na arang la carant l
3						Schedule D, line
	Name					Schedule E/F, line
	Number	Street	***			Schedule G, line
:						, <u>———</u>
3	City		State	ZIP Code		
لحت						Schedule D, line
	Name					Schedule E/F, line
	Number	Street		····		Schedule G, line
	Hannot	Guest			****	
	City		State	ZIP Code		

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 37 of 56

Fill in this i	nformation to identify	your case:					
Debtor 1	Chiquita	N	Hampton				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing	j) First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the: I	Northern District of Illinois					
Case number					Check if th	nis is:	
(If known)					An ame	ended filing	
						lement showing postpe as of the following dat	
Official F	orm 1061				MM / DI	D/ YYYY	
Sche	dule I: You	r Income					12/15
supplying co	prrect information. If your spou	essible. If two married pe ou are married and not fil use is not filing with you, top of any additional pa	ling jointly, and yo do not include inf	our spous formation	se is living with y า about vour spoเ	ou, include information use. If more space is ne	about your spouse. eded, attach a
Fill in you informati	ur employment on.		Debtor 1			Debtor 2 or non-filler	
attach a s	re more than one job, separate page with on about additional s.	Employment status	☐ Employed ☑ Not employ	⁄ed		☐ Employed ☐ Not employed	
	art-time, seasonal, or oyed work.						
Occupation	on may include student naker, if it applies.	Occupation					
		Employer's name					
		Employer's address					
		Employer a dudiesa	Number Street			Number Street	***************************************
			And the second s			Additional and the second seco	
			City	State	ZIP Code	City	State ZIP Code
		How long employed the	-			·	
		tron long omployee and		•		AND AND AND THE PROPERTY OF THE PARTY OF THE	
Part 2:	Give Details About	Monthly Income					
spouse u	nless you are separated	the date you file this form ave more than one employe					
below. If	you need more space, a	ttach a separate sheet to t	his form.	Jimanon	ior an employers re	in that person on the inico	
				\$7.000 mm	For Debtor 1	For Debtor 2 or non-filing spouse	
2. List mor deduction	nthly gross wages, salens). If not paid monthly,	ary, and commissions (be calculate what the monthly	efore all payroli y wage would be.	2.	\$0.00	\$	
3. Estimat	e and list monthly over	rtime pay.		3. +	\$0.00	+ \$	
4. Calcula	te gross income. Add li	ne 2 + line 3.		4.	\$0.00	\$	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main

Page 38 of 56 Document Hampton Debtor 1 Case number (if known) Last Name For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here..... 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 5e Insurance 0.00 5e. 0.00 5f. Domestic support obligations 5f. 0.00 5g. Union dues 5g 5h. Other deductions. Specify: 0.00 5h 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 0.000.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a 0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 0.00 8d. Unemployment compensation 8d. 8e. Social Security 8e 822.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps 900.00 8f 8g. Pension or retirement income 0.00 8g. 8h. Other monthly income. Specify: _ 8h. 0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 1,722.00 10. Calculate monthly income. Add line 7 + line 9. 1,722.00 0.00 1,722.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Food Stamps 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1.722.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12.

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

V	No.		
	Yes. Explair	1:	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 39 of 56

Fil	l in this i	nformation to identify y	our case:					
De	btor 1	Chiquita		lamptor	Check if the	e ie:		
		First Name	Middle Name Las	t Name			~	
	ebtor 2 bouse, if filing	g) First Name	Middle Name Las	it Name	☐ An ame			etition chapter 13
Un	ited States	s Bankruptcy Court for the: N	lorthern District of Illinois		expens	es as of t	he following	date:
	ise numbe known)	r			MM / DE	7 YYYY	·	
("								
<u>Of</u>	ficial	Form 106J						
S	che	dule J։ Yoւ	ır Expenses					12/15
info	rmation.	lete and accurate as pos If more space is neede Answer every question.	ssible. If two married people d, attach another sheet to tl	e are filin his form.	g together, both are equally r On the top of any additional p	esponsibl pages, wr	e for supplyi ite your name	ng correct e and case number
Pa	rt 1:	Describe Your Hous	sehold					
1. Is	s this a jo	oint case?						
5		So to line 2. Hoes Debtor 2 live in a so	eparate household?					
		No Yes. Debtor 2 must file	Official Form 106J-2, Expen	ses for Se	eparate Household of Debtor 2.			
	-	ave dependents? Debtor 1 and	☐ No ☑ Yes, Fill out this informa	ation for	Dependent's relationship to Debtor 1 or Debtor 2		ependent's ge	Does dependent live with you?
ב	Debtor 2.		each dependent			8		☐ No
	Do not sta names.	ite the dependents'			Daughter			Yes
					Son	6	·	□ No ☑ Yes
					Son	5		□ No ☑ Yes
					Son	2		□ No ☑ Yes
					Son	1	0	☐ No ☑ Yes
•	expense	expenses include s of people other than and your dependents?	☑ No ☐ Yes			isharananania Haliai sana		
		Carron Sancar Research Up and de annuelle and annuelle and annuelle and annuelle annuelle and annuelle annuelle	The second secon	Services mesuseramen unu un 5 e 5 e, eq.	AND AND A PROCESS AND			
Est exp	timate yo penses a plicable	our expenses as of your is of a date after the ban date.	kruptcy is filed. If this is a s	suppleme	re using this form as a supple ental <i>Schedul</i> e <i>J</i> , check the bo	ement in a	Chapter 13 op of the for	case to report m and fill in the
Inc	lude exp	enses paid for with nor	n-cash government assistar I it on <i>Schedule I: Your Inc</i> o	nce if you nme (Offi	know the value of		Your expe	
	The ren				first mortgage payments and	4.	\$	500.00
	•	icluded in line 4:						
		eal estate taxes				4a.	\$	0.00
		operty, homeowner's, or r	enter's insurance			4b.	\$	0.00
		ome maintenance, repair,				4c.	\$	0.00
		omeowner's association o				4d.	\$	0.00

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 40 of 56

Debtor 1

Chiquita N Hampton Case number (if known)_____

			Your ex	penses .
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	75.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	75.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	900.00
8.	Childcare and children's education costs	8.	\$	25.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.			E0.00
	Do not include car payments.	12.	\$	50.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13,	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other, Specify:	17d.	\$	0.00
18.	to the state of th	18.	\$	0.00
	and the second of the second o			
19.	Other payments you make to support others who do not live with you.	19.	\$	0.00
	Specify:		Ψ	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	10.		0.00
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 41 of 56

Debtor 1	Chiquita First Name	Middle Name	N Last Name	Hampton	Case number (if)	(nown)		
								·
21. Other.	. Specify:					21.	+\$	0.00
22. Calcula	ate your mo	nthly expense:	3.					
22a. Ad	dd lines 4 thro	ough 21.				22a.	\$	1,725.00
22b. Co	opy line 22 (n	nonthly expense	es for Debtor 2), if a	ny, from Official Form 106	J-2	22b.	\$	0.00
22c. Ad	dd line 22a ar	d 22b. The res	ult is your monthly o	expenses.		22c.	\$	1,725.00
≥3. Calculat	te vour mont	hly net income						
				m <i>Schedule I.</i>		23a.	\$	1,722.00
	 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 					23b.	- \$	1,725.00
		nonthly expense ur <i>monthly net</i>	es from your month income.	ly income.		23c.	\$	-3.00
For exam	nple, do you e	expect to finish	paying for your car	nses within the year after	you expect your			
	e payment to	increase or dec	crease because of a	a modification to the terms	of your mortgage?			
☑ No. ☐ Yes.	Explain h	ere:	and Activities makes and an indicative active active activities.	THE STATE OF THE S				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 42 of 56

Man and property						
	formation to identify y	Anna and a superior of the sup				
Debtor 1	Chiquita First Name	N Ha Middle Name Last N	mpton	Check if this	is:	
Debtor 2 (Spouse, if filing)	Fire! Name	Middle Name Last N	ame	— ☐ An amen	ded filing	
, ,		lorthern District of Illinois			ment showing po s as of the follow	stpetition chapter 13
Case number	and aptroprise			MM / DD/		ing date.
(if known)			, , , , , , , , , , , , , , , , , , ,	MINI / SU/	, 1111	
Official F	orm 106J					
Sched	ule J: You	ır Expenses				12/15
information. If	te and accurate as pos more space is neede swer every question.	ssible. If two married people a d, attach another sheet to this	are filing toge s form. On the	ther, both are equally res e top of any additional pa	sponsible for supp ages, write your na	olying correct ame and case number
Part 1:	Describe Your Hous	sehold				
1. is this a joir	nt case?					
☑ No. Go ☐ Yes. Do	to line 2. es Debtor 2 live in a se	eparate household?				
<u> </u>		Official Form 106J-2, Expense	s for Separate	Household of Debtor 2.		
2. Do you hav Do not list D	e dependents? ebtor 1 and	☐ No ☐ Yes. Fill out this information		dent's relationship to r 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2.		each dependent		ghter	8	☐ No ☑ Yes
names.	are aspertastic					☑ Yes □ No
			<u>Son</u>		<u>6</u>	☑ No ☑ Yes
			Son		5	☐ No Ø Yes
						521 Yes □ No
			Son		2	☑ Yes
			<u>Son</u>		10	☐ No ☑ Yes
expenses of	penses include of people other than d your dependents?	☑ No ☐ Yes				
Part 2: Es	itimate Your Ongoi	ng Monthly Expenses				
Estimate your expenses as applicable da	of a date after the ban	bankruptcy filing date unless kruptcy is filed. If this is a su	s you are usir pplemental S	g this form as a supplem chedule J, check the box	nent in a Chapter 1 at the top of the f	I3 case to report form and fill in the
		-cash government assistance				(penses
		it on Schedule I: Your Incom xpenses for your residence. I			Million Construence State of Mary Construence (Mary Construence of Mary Construence of	
	or nome ownership e or the ground or lot.	xpenses for your residence.	HICIOUC III SE HI	ortgage paymonia and	4. \$	500.00
	uded in line 4:				4- °	0.00
	estate taxes	(), ()			4a. \$	0.00
	erty, homeowner's, or re				4b. \$ 4c. \$	0.00
	e maintenance, repair, a eowner's association or				4d. \$	0.00

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 43 of 56

Debtor 1 Chiquita N Hampton
First Name Middle Name Last Name

Case number (# known)

			Your exp	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	75.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	75.00
	6d. Other Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	900.00
8.	Childcare and children's education costs	8.	\$	25.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.		_	50.00
	Do not include car payments.	12.	\$	50.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14,	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
10	Other payments you make to support others who do not live with you.			
19.	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incon	1e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 44 of 56

1	Chiquita First Name	Middle Name	N Last	Name	Hampto	<u>p</u> n	Case number (if known)	. .	***
her. St	pecify:							21.	+\$	0.00
	•									
lculate	your mont	hly expense	S,							
a. Add	lines 4 throu	gh 21.						22a.	\$	1,725.00
b. Copy	y line 22 (mo	nthly expens	es for Debte	or 2), if an	y, from Officia	Form 106J-2		22b.	\$	0.00
c. Add	line 22a and	22b. The res	ult is your r	monthly ex	rpenses.			22c.	\$	1,725.00
	-	•							¢	1,722.00
Сор	y line 12 (<i>yo</i>	ur combined	monthly inc	come) from	n Schedule I.			23a.	Ψ	
Сор	y your montl	nly expenses	from line 22	2c above.				23b.	- \$	1,725.00
Sub	tract your me	onthly expens	ses from you	ur monthly	/ income.					-3.00
The	result is you	r monthly ne	t income.					23c.	\$	-0.00
you ex	cpect an inc	rease or dec	rease in yo	our expen	ises within th	e year after yo	u file this form?	•		
	-	•		-						
No.	Zawanian sana mananan	PENNENS PENNENS NO DE SENSE PE	00 TO LOCAL TO BOTH TO THE STATE OF THE STAT	mandama e manna mina di anta e	gament petapholic school plane petapholic school and the school an	ere recons e racon un cercaniono de encocició de didiritar na fron	ann gan mara, ba's garain a mara mara dh'a dh'ann an seo ann an seo ann an seo	annen appropriation and the filter constitutions of	n namanananan ar ar ita ra rata 1990 (re	gina makaninan kan kan kan kan kan kan kan kan men in kan kan kan da
Yes.	Explain he	ere:								
	and the same									
	180000000000000000000000000000000000000									
	Park Lands & Co.									
	ther. Solution in the second s	culate your mont a. Add lines 4 throu b. Copy line 22 (mc c. Add line 22a and culate your month Copy line 12 (yo Copy your month Subtract your me The result is you you expect an inc example, do you e rtgage payment to i	ther. Specify: alculate your monthly expense a. Add lines 4 through 21. b. Copy line 22 (monthly expense c. Add line 22a and 22b. The res culate your monthly net incom Copy line 12 (your combined Copy your monthly expenses Subtract your monthly expenses The result is your monthly net you expect an increase or dec example, do you expect to finist rtgage payment to increase or dec	cher. Specify: Copy line 22 (monthly expenses for Debt c. Add lines 4 through 21.	ther. Specify: alculate your monthly expenses. a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if and c. Add line 22a and 22b. The result is your monthly expenses for Debtor 2) and c. Add line 22a and 22b. The result is your monthly expenses from line 22c above. Copy line 12 (your combined monthly income) from Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly The result is your monthly net income. you expect an increase or decrease in your expenses regage payment to increase or decrease because of a No.	ther. Specify: a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Officia c. Add line 22a and 22b. The result is your monthly expenses. culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. you expect an increase or decrease in your expenses within the regage payment to increase or decrease because of a modification to No.	ther. Specify: Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	ther. Specify:	ther. Specify:	ther. Specify: 21. +\$ Idulate your monthly expenses. a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses. 22c. culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. you expect an increase or decrease in your expenses within the year after you file this form? example, do you expect to finish paying for your car loan within the year or do you expect your rtgage payment to increase or decrease because of a modification to the terms of your mortgage? No.

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Page 45 of 56 Document

Fill in this in	iformation to ider	ntify your case:	
Debtor 1	Chiquita	N	Hampton
Dahtar 2	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for	the: Northern District of II	llinois
Case number (If known)			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

/hat i	is your current marital status?			
	arried ot married			
1 No				
\	es. List all of the places you lived in the last 3 ye	Dates Debtor 1	Debtor 2:	Dates Debtor 2 lived there
			☐ Same as Debtor 1	Same as Debtor
-	Number Street	From	Number Street	From
	City State ZIP Code		City State ZIP Code	
	entropies con propies constructive and majorite annot propie and a second propies and a second propies and a second		Same as Debtor 1	Same as Debtor
		From		From
-	Number Street	To	Number Street	То
	City State ZIP Code		City State ZIP Code	
Nithi	in the last 8 years, did you ever live with a sp	ouse or legal equi	valent in a community property state or territory? (Cda, New Mexico, Puerto Rico, Texas, Washington, and	Community property Wisconsin.)

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 46 of 56

otor 1	Chiquita N First Name Middle Name Last I	Hampton	Case nur	mber (if known)	
	rifst Name Middle (Name Last i	varne			
Fill i	you have any income from employment in the total amount of income you received by are filing a joint case and you have income and you have income the control of the contro	d from all jobs and all busing	nesses, including part-tin	ne activities.	dar years?
_	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
		Operating a business	, agrama a sanana mana di salah salah sana	Operating a business	
	For last calendar year:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
	(January 1 to December 31, 2013	Operating a business		Operating a business	
	For the calendar year before that:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	\$
	(January 1 to December 31,)	Operating a business	\$	Operating a business	4
	abling and lottery winnings. If you are filing each source and the gross income from e				
البها	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Social Security	\$9,864.00	white the first party and	\$
	the date you med for bankrupicy.		\$ \$		\$ \$
	For last calendar year:	Social Security	\$ 9,600.00		\$
	(January 1 to December 31,2013				\$
	man i ricky linku ram i rami diminima micky (t. mi minimu. mick i can sagarani		Φ	**************************************	Φ
	For the calendar year before that:	Social Security	\$9,360.00		\$
	(January 1 to December 31, 2013)				\$ \$
			a		Υ

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 47 of 56

Debtor 1

		_	
Chiquita	N	Hampton	Case number (if known)

	List Certain Pay							
Are eitl	her Debtor 1's or De	ebtor 2's deb	ts primarily co	onsumer det	ots?			
☐ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."							
						otal of \$6,225* or more?		
	No. Go to line	7.						
	Yes. List below	each creditor	hat creditor. Do	not include	payments for dome	in one or more payments a estic support obligations, s ey for this bankruptcy case	uch as	
						on or after the date of adju		
5 1 v.,	s. Debtor 1 or Debto	ur 2 ar bath b	avo nrimarily	consumer d	ehts.			
SEMITE:						total of \$600 or more?		
	No. Go to line			, , , , , , , , , , , , , , , , , , , ,				
	creditor, [o not include	payments for	domestic sur	of \$600 or more and oport obligations, su ney for this bankrup	d the total amount you paid uch as child support and ptcy case.	and the second s	
				Dates of payment	Total amount p	aid Amount you stil	owe Was this payment for	
					_ \$	\$	Mortgage	
	Creditor's Name				\$	<u> </u>	☐ Mortgage	
					_ \$	\$	- '	
	Creditor's Name				\$	\$	☐ Car	
					_ \$	<u> </u>	☐ Car☐ Credit card☐ Loan repayment	
	Number Street				\$	<u> </u>	☐ Car☐ Credit card☐ Loan repayment	
		State	ZIP Code		\$	\$\$	☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors	
	Number Street		ZIP Code		\$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other	
	Number Street		ZIP Code		\$ - - - - - - - -	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage	
	Number Street		ZIP Code		\$ - - - \$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car	
	Number Street	State	ZIP Code		\$ - - - - - - - -	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card	
	Number Street City Creditor's Name	State	ZIP Code		\$ - - - - - - -	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment	
	Number Street City Creditor's Name	State	ZIP Code		\$ - - - - - - -	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment	
	Number Street City Creditor's Name	State	ZIP Code		\$ - - - \$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors	
	Number Street City Creditor's Name Number Street	State			\$ - - - - - -	\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment	
	Number Street City Creditor's Name Number Street	State			\$\$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment	
	Number Street City Creditor's Name Number Street	State				\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Cother	
	City Creditor's Name Number Stree City Creditor's Name	State				\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other Other	
	City Creditor's Name Number Stree	State				\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other Other Credit card Loan repayment Mortgage Car Credit card	
	City Creditor's Name Number Stree City Creditor's Name	State				\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other Credit card Con repayment Mortgage Car Credit card Credit card	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 48 of 56

tor 1	Chiquita First Name Mid	idle Name	Last	Name	Hampt	on	Case number	(if known)		
corpo agen such	orations of which you t, including one for a as child support and	itives; any u are an of a business	general p ficer, dire	artners; rela ctor, person	tives of an in control,	y general pa or owner of	rtners; partnerships 20% or more of their	of which y r voting se	o was an insider? Ou are a general part Curities; and any mar mestic support oblig	aging
Z N										
∐ Y	es. List all payments	s to an insi	der.		Dates of payment	Total ai paid	mount Amount y	ou still R	eason for this paymen	
	Insider's Name					. \$	\$			
	Number Street			 -		-		annin manaya piyanan ya ga		
	City	S	tate ZIP	Code		-		Andrewski i delingua i romete v		
						\$	\$			
	Insider's Name					•				
	Number Street				***************************************	-		ł		
	Number Street	·/						TO THE REAL PROPERTY OF THE PARTY OF THE PAR		
	City			Code				TO THE WAY OF THE PARTY OF THE		
Withi u an in: Includ	City n 1 year before you sider? de payments on deb	ı filed for i	bankrupt eed or cos	cy, did you signed by ar		payments of Total a paid	en e	oustill Re	ecount of a debt that eason for this payment clude creditor's name	
Withing an instance of the control	City n 1 year before you sider? de payments on deb	ı filed for i	bankrupt eed or cos	cy, did you signed by ar	insider.	Total a	mount Amount y	oustill Re	ason for this paymen	
Within an ins Includ V N Y	City n 1 year before you sider? de payments on deb o es. List all payments	ı filed for i	bankrupt eed or cos	cy, did you signed by ar	insider.	Total a paid	mount Amount yo owe	oustill Re	ason for this paymen	on de Carlos de Pro-
Within an instance of the second of the seco	n 1 year before you sider? de payments on deb o es. List all payments insider's Name	ts guarantes that bene	bankrupt eed or cos	cy, did you signed by ar	insider.	Total a paid	mount Amount yo owe	oustill Re	ason for this paymen	on diplosing per princip
Within an instance of the second of the seco	City n 1 year before you sider? de payments on deb o es. List all payments	ts guarantes that bene	bankrupt eed or cos	cy, did you signed by ar	insider.	Total a paid	mount Amount yo owe	oustill Re	ason for this paymen	
Within an instance of the control of	n 1 year before you sider? de payments on deb o es. List all payments insider's Name	ts guarantes that bene	bankrupt eed or cos	cy, did you signed by ar	insider.	Total a paid	mount Amount yo owe	oustill Re	ason for this paymen	on diplosing per princip
Within an include of the control of	City n 1 year before you sider? de payments on deb o es. List all payments insider's Name Number Street	ts guarantes that bene	bankrupt eed or cos	cy, did you signed by ar	insider.	Total a paid	mount Amount ye owe	oustill Re	ason for this paymen	

Debtor 1

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 49 of 56

Debtor 1 Chiquita N Hampton Case number (if known)

	ruptcy, were you a party in any lawst njury cases, small claims actions, divord			
No Yes. Fill in the details.	Nature of the case	Court or agency	an alle meng	Status of the case
Case title		Court Name		Pending On appeal
THE PARTY OF THE P	_	Number Street		Concluded
Case number				
print in the content of the content	and the second s	City State	ZIP Code	
er films est vas set transfer en		# W T T T T T T T T T T T T T T T T T T		
Case title	_	Court Name		Pending
				On appeal Concluded
		Number Street		Conduded
Case number		City State	ZIP Code	
Yes. Fill in the information below.	Describe the property		Date	Value of the property
res. Fill in the information below.			Date	/alue of the property
Creditor's Name			Date	Value of the property
			Date	Value of the property
Creditor's Name	Describe the property	ssessed.	Date	Value of the property
Creditor's Name	Explain what happened Property was repo	closed.	Date	Value of the property
Creditor's Name	Explain what happened Property was report Property was forecompositions Property was garm	closed. ished.	Date	Value of the property
Creditor's Name Number Street	Explain what happened Property was report Property was garm Property was attact	closed. ished.		
Creditor's Name Number Street	Explain what happened Property was report Property was forecompositions Property was garm	closed. ished.	Date	
Creditor's Name Number Street	Explain what happened Property was report Property was garm Property was attact	closed. ished.		
Creditor's Name Number Street	Explain what happened Property was report Property was garm Property was attact	closed. ished.		
Creditor's Name Number Street City State	Explain what happened Property was report Property was garm Property was attact	closed. ished.		
Creditor's Name Number Street City State :	Explain what happened Property was reported Property was garm Property was attact	closed. ished. ched, seized, or levied.		
Creditor's Name Number Street City State :	Explain what happened Property was report Property was fored Property was garm Property was attact Describe the property	closed. ished. ched, seized, or levied.		
Creditor's Name City State Creditor's Name	Explain what happened Property was report Property was garm Property was attact Property was report	closed. ished. ched, seized, or levied. essessed. closed.		Value of the property Value of the propert \$

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 50 of 56

otor 1	Chiquita First Name	N Middle Name Las	Hampton	Case number (if known)
Wit	hin 90 days before	you filed for bankru	uptcy, did any creditor, including cause you owed a debt?	a bank or financial institution, set off any amounts from your
Z 1		make a payment be	cause you owed a debt?	
	Yes. Fill in the deta	ils.		
			A Charles San San San San	
			Describe the action the creditor t	
i	Creditor's Name			는 사람들이 Note 는 (전시)에 가능하는 이 was taken, 그리고 하는 등을 하지 않는데 되는 것은
Ī	Number Street		_	<u> </u>
_				
				de la constantina del constantina de la constantina de la constantina del constantina de la constantin
7	City	State ZIP Code	Last 4 digits of account number	: XXXX-
With	nin 1 year before y	ou filed for bankrupt	tcy, was any of your property in t	the possession of an assignee for the benefit of
cied	attors, a court-app	ointed receiver, a cu	stodian, or another official?	personal of the addignostron the benefit of
Z	-			
1	Yes			
15				
rt 5:	List Certain	Gifts and Contribu	ıtions	
y.	es. Fill in the detail Gifts with a total val per person	ue of more than \$600	Describe the gifts	Dates you gave Value the gifts
•.	Participation (1994)			the unit of the second distance of the second distance of
<u> </u>	erson to Whom You Gave	the 0%	• }	\$
,	erson to vinom You Gave	s the Gift		Manufacture
_				\$
N	umber Street	***************************************		
7277			· 	
Ci	ity	State ZIP Code	·	
Pe	erson's relationship to	you		
	And the second	nata natawa na matawa na	A CONTRACTOR OF THE PARTY OF TH	APPLICATION AND ADMINISTRATION ADMINISTRATION ADMINISTRATION AND ADMINISTRATION AND ADMINISTRATION ADMINISTRATION AND ADMINISTRATION AND ADMINISTRATION AND ADMINISTRATION AND ADMINISTRATION AND ADMINISTRATION AND ADMINISTR
	ifts with a total value er person	of more than \$600	Describe the gifts	Dates you gave Value
P	or person		English to the first term of the second	the gifts
Pe	erson to Whom You Gave	the Gift	!	
		***************************************		\$
_				
Nu	imber Street		1	
Cit	у	State ZIP Code		e compression and the comp
Pe	erson's relationship to	you		**************************************
	-	State ZIP Code		

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 51 of 56

btor 1	Chiquita First Name Middle Nar	N Last Name	Hampton	Case number (if known)
. Witi	hin 2 years before you fil	ed for bankruptcy,	did you give any gifts or cor	ntributions with a total value of more than \$600 to any charity?
Z	No Yes. Fill in the details for e			
	Gifts or contributions to chat total more than \$600	errorente appoiatore e	scribe what you contributed	Date you Value contributed
ē	Charity's Name			<u> </u>
•				<u> </u>
Ā	Number Street			
ō	City State ZIP Code	e	The control of the co	
				The state of the s
rt 6:	List Certain Losse	es		
	how the loss occurred	Incl clai	lude the amount that insurance has ims on line 33 of Schedule A/B: Pri	s paid. List pending insurance operty.
Water Committee of the		- critical continues		<u> </u>
i		heldered has able Mannagel 1, and 1, defined Manual 1, and 1, defined M		
rt 7:	List Certain Payme	·		
you c	consulted about seeking	bankruptcy or prep	paring a bankruptcy petition	on your behalf pay or transfer any property to anyone ?
Z N		cy petition preparers	s, or credit counseling agencie	s for services required in your bankruptcy.
☐ Y	es. Fill in the details.			
		4.5	cription and value of any proper	rty transferred Date payment or Amount of payment
F	Person Who Was Paid			transfer was high and the made
7	lumber Street	4		<u> </u>
-				\$
Ö	State State	ZIP Code		
Ē	mail or website address			
P	erson Who Made the Payment, if N	Not You		100 ALERON ALERO

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 52 of 56

ebtor 1	Chiquita First Name Middle	N e Name Last	Hampton Name	Case number (# known)	WARRANT A. A	
			· · · · · · · · · · · · · · · · · · ·			
		on the second section of the second section of the second section and second section section section section s	Description and value of any property t	ransferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
	Number Street					\$
						Ψ
	City	State ZIP Code				
	Email or website address		70- 1 3 1			
	Person Who Made the Payme	ent, if Not You		200		
Dor Z	not include any paymen	it with your credit	tors or to make payments to your cred ou listed on line 16.	iitors?		
			Description and value of any property to		Date payment or transfer was	Amount of paymen
	Person Who Was Paid		<u> </u>		made	
	Number Street			and imply According		\$
				West of the second		\$
	City	State ZIP Code	at a final but the state of the			
Inclu Do n	sferred in the ordinary ide both outright transfe	course of your less and transfers n	otcy, did you sell, trade, or otherwise to business or financial affairs? nade as security (such as the granting of the already listed on this statement. Description and value of property transferred		ortgage on your prop	perty).
	Person Who Received Transfe	er er	And the state of t	1,00	mar metantrati etinini etinalisi canista telahin celine teresi	
	Number Street					
	City S	tate ZIP Code				
	Person's relationship to yo)u				
	Person Who Received Transfe					
	Number Street					ere feet from the control of the control of
	City St	tate ZIP Code				
	Person's relationship to yo				abilitian (1975) and and the first class Schilaran (1995)	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Page 53 of 56 Document

Hampton

☑ No ☑ Yes. Fill in the details.	Description and value of the prop	the train of the Africa school they seem and a substitution of	
		the transfer of the African Court of the New York Court of the African Court of the	
			ite transfer
		Management A. Comment and the first of the property of the second of the	is made
Name of trust			

- White And Addition courses in increasing miles are many (Aug project Add), and condensation concerns around representations as a part of the click facility for an increase a concerns and an increase and according to the contract and according t			oor walks on a second to a second to describe the second to be a second to be a second to be a second to be a
8: List Certain Financial Accour			
thin 1 year before you filed for bankru	ptcy, were any financial accounts	or instruments held in your name, or for your benefit	,
osed, sold, moved, or transferred? clude checking, savings, money marke	et, or other financial accounts: cert	ificates of deposit; shares in banks, credit unions,	
okerage houses, pension funds, coop	eratives, associations, and other fi	nancial institutions.	
No			
Yes. Fill in the details.	alin indigiska kan inkasje su alin he	en en tradicione de la companya de La companya de la co	
	Last 4 digits of account number	Type of account or Date account was Last b	alance befo g or transfe
Name of Financial Institution	_ xxxx	☐ Checking \$	
Number Street		□ Savings	
Number Street		☐ Money market	
			
		☐ Brokerage	
City State ZIP Code	Andrew and the second s	☐ Brokerage ☐ Other	,
(1) - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	XXXX	_	
City State ZIP Code Name of Financial Institution	XXXX	Other\$\$	VIEW PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF T
(11-m-1-m)	XXXX	Other \$	
Name of Financial Institution	XXXX	Other\$\$	
Name of Financial Institution Number Street	XXXX	Checking \$Savings Money market	
Name of Financial Institution Number Street City State ZIP Code	_	☐ Other ☐ Checking \$ ☐ Savings ☐ Money market ☐ Brokerage ☐ Other	
Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within curities, cash, or other valuables?	_	☐ Other\$\$\$\$	
Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within curities, cash, or other valuables?	1 year before you filed for bankru	☐ Other ☐ Checking \$ ☐ Savings ☐ Money market ☐ Brokerage ☐ Other	
Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within curities, cash, or other valuables? No	1 year before you filed for bankru	Checking \$ \$	have it?
Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within curities, cash, or other valuables? No	1 year before you filed for bankru	Checking \$ \$	Do you stil have it? No Yes
Name of Financial Institution Number Street City State ZIP Code to you now have, or did you have within accurities, cash, or other valuables? No Yes. Fill in the details.	1 year before you filed for bankru	Checking \$ \$	have it?

Chiquita

Ν

Debtor 1

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 54 of 56

Debtor 1	Chiquita First Name Middle	Name Last P	Hampton lame	Ca	se number (if known)	
22. Have	e you stored property i No	n a storage unit o	r place other than your hon	ne within 1 yea	r before you filed for bankr	uptcy?
.	Yes. Fill in the details.		Who else has or had access t	to it?	Describe the contents	Do you still have it?
	Name of Storage Facility	THE STREET STREET	Name		•	☐ No ☐ Yes
	Number Street		Number Street			
	Cib.		City State ZIP Code			THE PROPERTY OF THE PROPERTY O
Part 9		rty You Hold o	r Control for Someone E		The second secon	. S. C
or h		property that so	meone else owns? include		ou borrowed from, are stor	ng for,
_	Yes. Fill in the details.		Where is the property?	ere anna er i	Describe the property	Value
	Owner's Name					\$
	Number Street		Number Street			
	City S	ate ZIP Code	City State	ZIP Code		
Part 1	0: Give Details A	bout Environm	ental information			3
For the	purpose of Part 10, the	e following defini	tions apply:			
Envi haza	ironmental law means ardous or toxic substa	any federal, state	, or local statute or regulation naterial into the air, land, so the cleanup of these subst	il. surface wat	er, groundwater, or other m	pleases of redium,
Site	means any location, fa	cility, or property	as defined under any envir , including disposal sites.			rate, or
<i>Haza</i> subs	ardous material means stance, hazardous mat	anything an envi erial, pollutant, co	ronmental law defines as a ontaminant, or similar term.	hazardous was	ste, hazardous substance, t	oxic
Report	all notices, releases, a	nd proceedings ti	nat you know about, regardi	ess of when th	ney occurred.	
_		notified you that	you may be liable or potent	ially liable und	er or in violation of an envir	onmental law?
	ło /es. Fill in the details.					
			Governmental unit	Environm	ental law, if you know it	Date of notice
Ñ	lame of site		Governmental unit			
Ñ	iumber Street	,	lumber Street	Service Construction		mana, sara nangga managga yang sarangga ya
			State ZIP Code	e		
ō	ity State	e ZIP Code				

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 55 of 56

r1	Chiquita	N	Hampton	Case number (if known)
	First Name	Middle Name	Last Name	·
lave	vou notified a	nv governmental i	unit of any release of hazardous mate	erial?
ZÍ N		., 9		× 1411
_	lo 'es. Fill in the c	1-4-9-		
	es. Fill in the C	ietalis.		
			Governmental unit	Environmental law, if you know it Date of notice
	Name of site		Governmental unit	
	Number Street		Number Street	1900A
			City State ZIP Code	
				
	City	State ZIP Co	ode	
ave	vou heen a na	rty in any judicial	or administrative proceeding under s	any environmental law? Include settlements and orders.
		ity ili ally judicial	or administrative proceeding under a	my environmental law: include settlements and orders.
Í				
Jγ	es. Fill in the d	letails.		egy Projection in the expression of the expression and the expression of the express
			Court or agency	Nature of the case Status of the case
,	ase title			
`	ase title		Court Name	—— Pending
				On appeal
-			Number Street	☐ Conclude:
ō	ase number	·	City State ZIP C	Coda
			•	OR ALL DRIVE TO THE CONTROL OF THE C
		f a limited liability	oyed in a trade, profession, or other a company (LLC) or limited liability pa	
	An officer, d	irector, or managi	ng executive of a corporation	
	An owner of	at least 5% of the	voting or equity securities of a corpo	oration
,				
		above applies. Go		
a Y	es. Uneck all ti	nat apply above al	nd fill in the details below for each but Describe the nature of the busin	· · · · · · · · · · · · · · · · · · ·
			Describe the nature of the busin	Do not include Social Security number or ITIN.
	Business Name			
				EIN:
	Number Street			
			Name of accountant or bookkee	per Dates business existed
				Erom To
	O24	A1.4	<u></u>	From To
	City	State ZIP Co	and the second s	less Employer Identification number
			Describe the nature of the busin	Do not include Social Security number or ITIN.
	Business Name			TO HOLINGIA COUNTY HARMON OF THE
				EIN:
	Number Street		Name of accounts of a backton	Pates huginess evisted
			Name of accountant or bookkee	per Dates business existed
				From To
	City	State ZIP Co	de	

Case 15-43171 Doc 1 Filed 12/23/15 Entered 12/23/15 13:15:06 Desc Main Document Page 56 of 56

Debtor 1	Chiquita First Name	N Middle Name Last N	Hampton	Case number	if known)
	rust wante 1	miodie Name Last N	ame		
	tonicione e transfer e e e e e e e	21. 84mm 2 m = 1 20 20 20 10 mm m	Describe the nature of the business		Employer Identification number
	Business Name		Describe the nature of the pusiness		Do not include Social Security number or ITIN.
	Business Name		To the state of th		EIN:
	Number Street		Name of accountant or bookkeeper		Dates business existed
	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
					From To
	City	State ZIP Code		aki kiliki wali la mana manaki mamaliwa ma	
		encione a responsor a professo from their discountered for the size of the size (AP-25) of APAPP 1999 4 to 4		ent of the leads and southful the controlled later were last from the list believe the controlled last the later the last the last the later the last the la	
	iin 2 years before itutions, creditors		cy, did you give a financial stateme	ent to anyone ab	out your business? Include all financial
Q 1		•			
	es. Fill in the deta	ails below.			
			Date issued		
	Name	The second secon	MM / DD / YYYY		
	4				
	Number Street				
	······································				
	City	State ZIP Code			
	•				
Part 1	3 Sign Below				
*.					
					clare under penalty of perjury that the y, or obtaining money or property by fraud
in d 18	connection with a U.S.C. §§ 152, 134	bankruptcy case can 1, 1519, and 3571.	result in fines up to \$250,000, or im	prisonment for	up to 20 years, or both.
×	Ohia	int H	confex		
	Signature of Debtor	J	Signature of Debtor	2	<u></u>
	·	O .			
Dia	Date		Dateatement of Financial Affairs for Ind		Pantruntay (Official Form 407)2
		onal pages to rour St	atement of Financial Alians for mo	ividuais riiliy it	or Bankruptcy (Official Form 167)?
	No Yes				
Did	you pay or agree	to pay someone who	is not an attorney to help you fill o	ut bankruptcy fo	rms?
u	Yes. Name of pers	on		Attach Decla	the <i>Bankruptcy Petition Preparer's Notice,</i> ration, and Signature (Official Form 119).